Date

07/25/2003

U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY	Attorney Docket No.	P1396 US							
PATENT APPLICATION	First Inventor	Inventor Fertac Bilge							
TRANSMITTAL	Title	CATHETER TIP RETENTION DEVICE							
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No. EV325092859US								
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO:	Mail Stop Patent Ap Commissioner for P P.O. Box 1450 Alexandria VA 2231	plication a garanteents as-1450						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 To: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 To: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 To: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 To: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 To: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 To: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 To: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 To: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 To: Computer Program identified or Computer Program (Appendix) Nuclectitie and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Reader Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or To: CD-ROM or CD-R (2 copies); or Specification Sequence Listing on: ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS ACCOMPANYING APPLICATION PARTS To: CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) Specification Sequence Submission (if applicable, all necessary) a. Computer Program (Appendix) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or Statement sequified for Between the Accompany or CD-R (2 copies); or ACCOMPANYING APPLICATION PARTS To: CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or Statement sequified for Between the Accompany or CD-R (2 copies); or To: CD-ROM or CD-R in duplication for Patents or Patents or Patents or CD-R (2 copies); or CD-ROM or CD-R (2 copies); o									
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:									
Continuation Divisional Continuation-in-part (CIP) of prior application No.:									
19. CORRESPONDENCE ADDRESS									
X Customer Number: 28390	OR [Correspondenc	e address below						
Name									
Address									
City	State	Zip C	ode						
Country	elephone	Fa	х						
Name (Print/Type) Janis J. Bikşa	Registration No. (Attorne	y/Agent) 33648	<u>_</u>						

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

ano

Jun

Signature

PTO/SB/17 (05-03)
Approved for use through 04/30/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Applicant claims small entity status. See 37 CFR 1.27	FEE TRANSMITTAL							Complete if Known								
First Named Inventor Fertac Bilge	FEE IKANSIVIIIIAL							∟ [Application Number							
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (check all that apply) Check Credit carr Money Other Mone Check Credit carr Money Other Money Check Credit carr Money Other Money Check Credit carr Check Credit Check	for EV 2002						1	Filing Date								
Examiner Name Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (S) 790.00 METHOD OF PAYMENT (check all that apply) Check Credit card Money Other None Order Deposit Check Tredit card Money Other None Check Credit card Money Other None Check Tredit card Money Other None Check Credit card Money Other Intelligence Other Check Credit card Money Other Intelligence Other Check Credit card Money Other Intelligence Other Check Credit card Money Other Check Credi							ſ	First Named Inventor Fertag			itor	Fertac	Bilge			
And Unit Art Unit	Effective 01/01/2003. Patent fees are subject to annual revision.															
METHOD OF PAYMENT (check all that apply) Submitted P1396 US	Applicant claims small entity status. See 37 CFR 1.27						Ì									
### METHOD OF PAYMENT (check all that apply) Check Gredit card Money Other None Order	TOTAL AMOUNT OF PAYMENT (\$) 790.0						o I	01200				P1396	US			
Check Credit card Money Other None Order Order None Order Order Order None Order Ord									7 440111	<u>.,</u>	_	==	0111.47		==-	
Supposit Account																
Supposit Account O12525	Check [Credit	card [Other	ione					:5			ì	
Code (s)		Account:					- 1						Fee [Description	Ì	
Number Deposit Medtronic AVE, Inc. 1052 50 205 25 Surfarage - late provisional filing fee or cover sheet		1		012	2525				(\$)	Code				•	Fee Paid	
Account Name The Commissioner is authorized to: (Check all that apply) The Commissioner is authorized to: (Check all that apply) The Commissioner is authorized to: (Check all that apply) The Commissioner is authorized to: (Check all that apply) The Commissioner is authorized to: (Check all that apply) The Commissioner is authorized to: (Check all that apply) The Commissioner is authorized to: (Check all that apply) The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Commissioner is authorized to: (Check all that apply) The Cerdit any overpayments The Cerdit any overpayments The Cerdit any overpayments The Cerdit any overpayments application The Cerdit any overpayments The Cerdit any ov	Number	 		===			ร์ ไ						•	•		
The Commissioner is authorized to: (check all that apply)	Account	İ	Medtr	onic	AVE,	Inc.	1	1052	50	2052	25					
Charge fee(s) indicated below Credit any overpayments Credit any overpayment Credit any overpayments Credit any overpayments Credit any		ioner is a	uthorized	to: (c	heck all t	hat apply)	_	1053	130	1053	130	Non-E	English specification			
Charge feels) indicate below, except for the filing fee to the above-identified deposit account. FEE CALCULATION 1805 1,840* 1805 1,8					_		ents				_,		- ,			
Second S	=						cation	1804	920*	1804	920*					
1. BASIC FILING FEE Arge Entity Small Entity Fee	<u> </u>			•	t for the	tiling fee		1805	1,840*	1805	1,840*					
1. BASIC FILING FEE Targe Entity Small Entity		FE	E CAL	CUL	ATION			1251	110	2251	55			• •		
Fee Fee Fee Fee Fee Fee Fee Fee Description Fee Paid 1254 1.450 2255 985 Extension for reply within fourth month 1255 1.970 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 1.970 1255 985 Extension for reply within fourth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Path is approach 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Extension for reply within fifth month 1255 1.970 1255 985 Path is approach 12	1. BASIC FILING FEE							2252	205			• •	├ 			
Code (\$) Code (\$) Code (\$)				D		Ean D				1				•	┝╼╌┤╽	
1002 330 2002 165 Design filing fee 1401 320 2401 160 Notice of Appeal 1402 320 2402 160 Filing brief in support of an appeal 1402 320 2402 160 Filing brief in support of an appeal 1403 280 2403 140 Request for oral hearing 1403 280 240			<u>ree</u>	Desci	ription	ree P	aid	1254	1,450	2254	725			•		
1002 330 2002 165 Design filing fee 1401 320 2401 160 Notice of Appeal 1401 320 2401 160 Notice of Appeal 1402 320 2402 160 Filing brief in support of an appeal 1402 320 2402 160 Filing brief in support of an appeal 1403 280 2403 140 Request for oral hearing 1405 140	1001 750	2001 37	5 U	tility fili	ng fee	750	001	1255	1,970	2255	985	Exter	nsion for re	eply within fifth month	 	
1004 750 2004 375 Reissue filing fee 1403 280 2403 140 Request for oral hearing 1451 1,510 1451 1,510 1451 1,510 Petition to revive - unavoidable 1452 110 2452 55 Petition to revive - unavoidable 1453 1,300 2453 650 Petition to revive - unintentional 1453 1,300 2453 650 Petition to revive - unintent	1002 330	2002 16	5 D	esign f	iling fee	130	<u>.</u>	1401	320	2401	160	Notic	e of Appea	al	├ 	
SUBTOTAL (1) (\$) 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from Local Substance of the street	1003 520	2003 26	0 PI	lant filir	ng fee		\neg	1402	320	2402	160	Filing	brief in su	ipport of an appeal	<u> </u>	
SUBTOTAL (1) (\$) 1452 110 2452 55 Petition to revive - unavoidable 1453 1,300 2453 650 Petition to revive - unintentional 1501 1,300 2501 650 1502 470 2502 235 2509 petition to revive - unintentional 1501 1,300 2501 650 1502 470 2502 235 2509 petition to revive - unintentional 1501 1,300 2501 650 1501 petition to revive - unintentional 1501 1,300 2501 650 1501 petition to revive - unintentional 1501 1,300 2501 650 1501 petition to revive - unintentional 1501 1,300 2501 650 1501 petition to revive - unavoidable 1501 1,300 2501 650 1501 petition to revive - unintentional 1501 petition 1502 petition to revive - unintentional 1501 petition 1502 petition to revive - unintentional 1501 petition 1500 petition to revive - unintentional 1501 petition 1502 petition 1501 petition 1501 petition 1502 petition 1501 petition 1502 petition 1501 petitio	1004 750	2004 37	5 R	eissue	filing fee			1403	280	2403	140	Requ	est for oral	hearing	<u> </u>	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from Extra Claims 16 -20** = 0 X = 0 Independent Claims 13 - 3** = 0 X = 0 Independent Claims Multiple Dependent Large Entity Small Entity Fee Fee Code (\$) Code (1005 160 2005 80 Provisional filing fee				1451	1,510	1451	1,510	Petitio	on to institute a public use proceeding						
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from hellow Fee Paid hellow Total Claims 16	SUBTOTAL (1) (\$)						1452	110	2452	55	Petition	on to revive - unavoidable				
Fee From helow Fee Paid Independent 3 - 3** = 0	\(\frac{\frac}\frac{\frac}\frac{\frac{\frac{\frac{\frac}\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fra							1453	1,300	2453	650	Petiti	on to revive - unintentional			
Total Claims 16 - 20** = 0	Fee from Ext <u>ra Claims below Fee Paid</u>									l				•		
Independent 3							$\overline{}$			1		•	•			
Claims Multiple Dependent Large Entity Small Entity Fee Fee Fee Fee Code (\$) Small Entity Small	Independent 3 3** - 0 v								1							
Large Entity Small Entity Small Entity Fee Fee Code (\$) Small Entity Small	Claims						-			1						
Fee Fee Code (\$) 1202 18 1202 9 Claims in excess of 20 1203 280 2203 140 Multiple dependent claims, if not paid 1204 84 1204 84 2204 42 Reissue independent claims over original patent sum or or each additional invention to be examined (37 CFR 1.129(a)) 1809 750 2809 375 Filing a submission after final rejection (37	Large Entity Small Entity									1			\"			
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claims over original patent over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$) 750.00 **or number previously paid, if greater, For Reissues, see above SUBMITTED BY Name (Print/Type) Janis J. Biksa Roll 1204 1802 90 Request for continued Examination (RCE) (\$1802 900 Request for expedited examination of a design application Other fee (specify) *Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Roll 1205 1802 90 Request for expedited examination of a design applicable) *Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Registration No. (Attorney/Agent)	Fee Fee	Fee	Fee	Fee I	Descripti	<u>on</u>				1						
1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 "Reissue independent claims over original patent over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$\$) 750.00 **or number previously paid, if greater, For Reissues, see above SUBMITTED BY Registration No. (Attorney/Agent) 1809 750 2809 375 Filing a submission after final rejection (37 CFR 1.129(a)) 1810 750 2810 375 For each additional invention to be examined (37 CFR 1.129(b)) 1801 750 2801 375 Request for Continued Examination (RCE) 1802 900 1802 900 Request for expedited examination of a design application Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$\$) 40.00	, .			- 1	8021	40	8021	40				40.00				
1204 84					1809	750	2809	375								
1204 84 2204 42 Reissue Interpretation Country 1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$) 750.00 **or number previously paid, if greater, For Reissues, see above SUBMITTED BY Reissue claims in excess of 20 and over original patent Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00 Registration No. (Attorney/Agent)		ĺ		•	•	·	paid	1810	750	2810	375					
and over original patent SUBTOTAL (2) (\$) 750.00 The fee (specify) Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00 SUBMITTED BY Name (Print/Type) Janis J. Biksa Registration No. (Attorney/Agent) 33648 Telephone 707-566-1888					1801	750	2801	375		-	* **	 				
SUBTOTAL (2) (\$) 750.00 **or number previously paid, if greater, For Reissues, see above SUBMITTED BY Name (Print/Type) Janis J. Biksa Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00 (\$) 40.00 Registration No. (Attorney/Agent) (Attorney/Agent) 33648 Telephone 707-566-1888						1802	900	1802	900							
**or number previously paid, if greater, For Reissues, see above Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00 SUBMITTED BY (Complete (if applicable) Name (Print/Type) Janis J. Biksa Registration No. (Attorney/Agent) 33648 Telephone 707-566-1888	· · · · · · · · · · · · · · · · · · ·							Other	- · · · · · · · · · · · · · · · · · · ·					<u> </u>		
Name (Print/Type) Janis J. Biksa Registration No. (Attorney/Agent) 33648 Telephone 707-566-1888	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '								*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00							
Janis J. Biksa (Attorney/Agent) 33648 relephone /0/-566-1888	SUBMITTED BY (Complete (if applicable)															
	Name (Print/Type) Janis J. Biksa											88				
									3-1.11							

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.